

<i>SERFF Tracking Number:</i>	<i>TRVE-125368252</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Travelers Casualty and Surety Company of America</i>	<i>State Tracking Number:</i>	<i>EFT \$100</i>
<i>Company Tracking Number:</i>	<i>2007-05-0087</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0006 Directors & Officers Liability</i>
<i>Product Name:</i>	<i>HOA Condo Non-Profit D&O Filing 2007-05-0087</i>		
<i>Project Name/Number:</i>	<i>HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087</i>		

Filing at a Glance

Company: Travelers Casualty and Surety Company of America		
Product Name: HOA Condo Non-Profit D&O	SERFF Tr Num: TRVE-125368252	State: Arkansas
Filing 2007-05-0087		
TOI: 17.0 Other Liability - Claims Made/Occurrence	SERFF Status: Closed	State Tr Num: EFT \$100
Sub-TOI: 17.0006 Directors & Officers Liability	Co Tr Num: 2007-05-0087	State Status: Fees verified and received
Filing Type: Rate	Co Status:	Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding
	Authors: Socorro Armstrong, Theresa Lavenburg, Michelle Smith Cotto, Celina Caez	Disposition Date: 11/29/2007
	Date Submitted: 11/27/2007	Disposition Status: Filed
Effective Date Requested (New): 11/27/2007		Effective Date (New):
Effective Date Requested (Renewal): 11/27/2007		Effective Date (Renewal):
State Filing Description:		

General Information

Project Name: HOA Condo Non-Profit D&O Filing 2007-05-0087	Status of Filing in Domicile:
Project Number: 2007-05-0087	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 11/29/2007	
State Status Changed: 11/29/2007	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
2007-05-0087	
Other Liability- Non-Profit Directors and Officers Liability	
Rate Filing	

<i>SERFF Tracking Number:</i>	<i>TRVE-125368252</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Company Tracking Number:</i>	<i>2007-05-0087</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0006 Directors & Officers Liability</i>
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TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA 3548-31194

Tax ID 06-0907370

In compliance with the insurance laws and regulations in your state, we are submitting an enhancement to our current Non-Profit Directors and Officers Liability program, which was approved by your department. This filing consists of one (1) new optional endorsement that is available to all eligible policyholders.

Purpose

The enclosed Property Management Endorsement CIRI 73101 (09-07), currently has a one million dollar sublimit. In order to allow the insurer flexibility in increasing the amount of coverage they would like to provide for property managers we have created a new Property Management Endorsement. The new Property Management Endorsement CIRI 73101 (09-07) amends the definition of the Insured to include outside property management representatives. Further, Property Management Endorsement CIRI 73101 (09-07) provides flexibility in the amount of coverage allowed; as such we have left the sublimit amount blank. The overall rating impact for this new optional endorsement is 5%.

Company and Contact

Filing Contact Information

Michelle Smith Cotto, Regulatory Analyst	MSMITHCO@travelers.com
One Tower Square	(860) 277-2345 [Phone]
Hartford, CT 06183	(860) 235-4951[FAX]

Filing Company Information

Travelers Casualty and Surety Company of America	CoCode: 31194	State of Domicile: Connecticut
One Tower Square	Group Code: 3548	Company Type:
2S2B		
Hartford, CT 06183	Group Name:	State ID Number:
(860) 277-0179 ext. [Phone]	FEIN Number: 06-0907370	

Filing Fees

SERFF Tracking Number: TRVE-125368252 *State:* Arkansas
Filing Company: Travelers Casualty and Surety Company of America *State Tracking Number:* EFT \$100
Company Tracking Number: 2007-05-0087
TOI: 17.0 Other Liability - Claims Made/Occurrence *Sub-TOI:* 17.0006 Directors & Officers Liability
Product Name: HOA Condo Non-Profit D&O Filing 2007-05-0087
Project Name/Number: HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Travelers Casualty and Surety Company of America	\$100.00	11/27/2007	16805769

SERFF Tracking Number: TRVE-125368252 State: Arkansas
Filing Company: Travelers Casualty and Surety Company of America State Tracking Number: EFT \$100
Company Tracking Number: 2007-05-0087
TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0006 Directors & Officers Liability
Product Name: HOA Condo Non-Profit D&O Filing 2007-05-0087
Project Name/Number: HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	11/29/2007	11/29/2007

SERFF Tracking Number:	TRVE-125368252	State:	Arkansas
Filing Company:	Travelers Casualty and Surety Company of America	State Tracking Number:	EFT \$100
Company Tracking Number:	2007-05-0087		
TOI:	17.0 Other Liability - Claims Made/Occurrence	Sub-TOI:	17.0006 Directors & Officers Liability
Product Name:	HOA Condo Non-Profit D&O Filing 2007-05-0087		
Project Name/Number:	HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087		

Disposition

Disposition Date: 11/29/2007

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: TRVE-125368252 State: Arkansas

Filing Company: Travelers Casualty and Surety Company of America State Tracking Number: EFT \$100

Company Tracking Number: 2007-05-0087

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0006 Directors & Officers Liability

Product Name: HOA Condo Non-Profit D&O Filing 2007-05-0087

Project Name/Number: HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087

Item Type	Item Name	Item Status	Public Access
Supporting Document	Cover Letter	Filed	Yes
Supporting Document	PC NAIC	Filed	Yes
Rate	Rating Plan	Filed	Yes

SERFF Tracking Number:	TRVE-125368252	State:	Arkansas
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Company Tracking Number:	2007-05-0087		
TOI:	17.0 Other Liability - Claims Made/Occurrence	Sub-TOI:	17.0006 Directors & Officers Liability
Product Name:	HOA Condo Non-Profit D&O Filing 2007-05-0087		
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Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: TRVE-125368252 State: Arkansas

Filing Company: Travelers Casualty and Surety Company of America State Tracking Number: EFT \$100

Company Tracking Number: 2007-05-0087

TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0006 Directors & Officers Liability

Product Name: HOA Condo Non-Profit D&O Filing 2007-05-0087

Project Name/Number: HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087

Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Filed	Rating Plan	HOA-RP-8	New	HOA-Condo Rating Plan - Final 200709a.pdf

Homeowner and Condominium Associations Rating Plan

IV. Endorsements

1. When the Amended Definition of Insured to Include Property Manager and Increase Sublimit Endorsement CIRC 73101 (09-07) is purchased apply a charge of +5%.

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Product Name: HOA Condo Non-Profit D&O Filing 2007-05-0087
Project Name/Number: HOA Condo Non-Profit D&O Filing 2007-05-0087/2007-05-0087

Supporting Document Schedules

		Review Status:	
Satisfied -Name:	Cover Letter	Filed	11/29/2007
Comments:			
Attachment:			
AR HOA CONDO2007-05-0087.rates.pdf			

		Review Status:	
Satisfied -Name:	PC NAIC	Filed	11/29/2007
Comments:			
Attachments:			
2007 PC NAIC Transmittal (generic) (2).pdf			
2007 NAIC Rate Header.pdf			



One Tower Square, 2SHS
Hartford, CT 06183

Michelle Smith Cotto
Travelers Bond and Financial Products
Phone: (860) 277-2345
FAX: (866) 235-4951
Email: msmithco@travelers.com

November 27, 2007

Honorable Mike Pickens
Commissioner of Insurance
Arkansas Insurance Dept
1200 West Third Street
Little Rock, AR 72201-1904

2007-05-0087A
Other Liability- Non-Profit Directors and Officers Liability
Rate Filing

TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA 3548-31194
Tax ID 06-0907370

Dear Mr. Pickens:

In compliance with the insurance laws and regulations in your state, we are submitting an enhancement to our current Non-Profit Directors and Officers Liability program, which was approved by your department on December 11, 1998 under our company filing number 1998-4-MC-130a.

Purpose

The enclosed Property Management Endorsement CIRI 73101 (09-07), currently has a one million dollar sublimit. In order to allow the insurer flexibility in increasing the amount of coverage they would like to provide for property managers we have created a new Property Management Endorsement. The new Property Management Endorsement CIRI 73101 (09-07) amends the definition of the Insured to include outside property management representatives. Further, Property Management Endorsement CIRI 73101 (09-07) provides flexibility in the amount of coverage allowed; as such we have left the sublimit amount blank. The overall rating impact for this new optional endorsement is 5%.

Enclosures and Implementation

The following are enclosed to facilitate your review:

- Rate Plan
- Any applicable state filing forms and fees.

We plan to implement this filing as soon as possible with respect to all business. Should you have any questions, please feel free to call me at (860) 277-2345.

Sincerely,

Michelle Smith Cotto

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	Group NAIC #
Travelers	3548

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Travelers Casualty and Surety Co. of America	CT	31194	06-0907370	

5. Company Tracking Number	2007-05-0087A
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Michelle Smith Cotto One Tower Square, 2SH Hartford CT 06183	Senior Regulatory Analyst	860-277-2345	860-235-4951	msmithco@travelers.com
7. Signature of authorized filer		<i>Michelle Smith Cotto</i>		
8. Please print name of authorized filer		Michelle Smith Cotto		

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	17.0
10. Sub-Type of Insurance (Sub-TOI)	Directors and Officers Liability
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	Directors and Officers Non-Profits
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 12/27/07 Renewal: 12/27/07
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	11/27/2007
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20.	This filing transmittal is part of Company Tracking #	2007-05-0087A
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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2007-05-0087A
 Other Liability- Non-Profit Directors and Officers Liability
 Rate Filing

TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA 3548-31194
 Tax ID 06-0907370

Dear Mr. Pickens:

In compliance with the insurance laws and regulations in your state, we are submitting an enhancement to our current Non-Profit Directors and Officers Liability program, which was approved by your department on December 11, 1998 under our company filing number 1998-4-MC-130a. The form portion of this filing will be submitted under separate cover.

Purpose
 The enclosed Property Management Endorsement CIRI 73101 (09-07), currently has a one million dollar sublimit. In order to allow the insurer flexibility in increasing the amount of coverage they would like to provide for property managers we have created a new Property Management Endorsement. The new Property Management Endorsement CIRI 73101 (09-07) amends the definition of the Insured to include outside property management representatives. Further, Property Management Endorsement CIRI 73101 (09-07) provides flexibility in the amount of coverage allowed; as such we have left the sublimit amount blank. The overall rating impact for this new optional endorsement is 5%.

Enclosures and Implementation
 The following are enclosed to facilitate your review:

- Rate Plan
- Any applicable state filing forms and fees.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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Check #: EFT
Amount: \$100.00

Per Rate filing fee = \$100.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

RATE/RULE FILING SCHEDULE - Arkansas

(This form must be provided ONLY when making a filing that includes rate-related items such as Rate; Rule; Rate & Rule; Reference; Loss Cost; Loss Cost & Rule or Rate, etc.)

(Do not refer to the body of the filing for the component/exhibit listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	2007-05-0087A
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2.	This filing corresponds to form filing number (Company tracking number of form filing, if applicable)	N/A
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☐ Rate Increase ☐ Rate Decrease ☒ Rate Neutral (0%)

3.	Filing Method (Prior Approval, File & Use, Flex Band, etc.)	File & Use
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4a.	Rate Change by Company (As Proposed)						
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)
TCSA	NA	0.00%	0	NA	28,452	-17%	0.00%

4b.	Rate Change by Company (As Accepted) For State Use Only						
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Company Name	Overall % Indicated Change (when applicable)	Overall % Rate Impact	Written premium change for this program	# of policyholders affected for this program	Written premium for this program	Maximum % Change (where required)	Minimum % Change (where required)

Overall Rate Information (Complete for Multiple Company Filings only)			
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		COMPANY USE	STATE USE
5a.	Overall percentage rate indication (when applicable)	NA	
5b.	Overall percentage rate impact for this filing	0.00%	
5c.	Effect of Rate Filing – Written premium change for this program	0	
5d.	Effect of Rate Filing – Number of policyholders affected	NA	

6.	Overall percentage of last rate revision	-14.30%
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7.	Effective Date of last rate revision	8/1/2005
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8.	Filing Method of Last filing (Prior Approval, File & Use, Flex Band, etc.)	File & Use
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9.	Rule # or Page # Submitted for Review	Replacement or Withdrawn?	Previous state filing number, if required by state
01	HOA-RP-8	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
02		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	
03		<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn	